AUG 1 3 2007 PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE work Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** PARADEUN 10/756,970 TRANSMITTAL Filing Date January 13, 2004 First Named Inventor **FORM** Kevin T. Foley et al. Art Unit 3733 **Examiner Name** Mary C. Hoffman (to be used for all correspondence after initial filing)

Attorney Docket Number

Total Number of Pages in This Submission

the date shown below:

Typed or printed name

Brad A. Schepers

Signature

MSDI-223/PC444.06

ENCLOSURES (Check all that apply)										
\ \ \	Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement	ENCLOSURES (Check all that apply)  □ Drawing(s) □ Licensing-related Papers □ Petition □ Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address □ Terminal Disclaimer □ Request for Refund □ CD, Number of CD(s) □ After Allowance Communication to TC     (Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) □ Proprietary Information □ Status Letter □ ✓ Other Enclosure(s) (please Identify below): □ Return Receipt Postcard								
	Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application  Reply to Missing Parts under 37 CFR 1.52 or 1.53	Landscape Table on CD  Remarks								
	SIGNA	URE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name  Krieg De Vault LLP  Signature										
Printed name Brad A. Schepers										
Date	August 9, 2007	Reg. No. 45,431								
	CERTIFICATE OF TRANSMISSION/MAILING									

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

August 9, 2007

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

PTO/SB/17 (12-04v2)

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FEE TRANSMITTAL For FY 2005  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT  (\$) 130.00  METHOD OF PAYMENT (check all that apply)  Check  Credit Card  Money Order  None  Other (please identify): Deposit Account Deposit Account Number 12.2424  Deposit Account Name: Krieg DeVault Lundy For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(5) indicated below  Charge fee(5) indicated below, except for the filing fee Charge fee(5) indicated below  Charge fee(5) indicated below, except for the filing fee Charge fee(5) indicated below  Charge fee(5) indicated below, except for the filing fee WARNING: Information and authorization on PTC-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES Mapilication Type  Fee (5) Fee (6) Fe	Fees pursuant to the Consolidat	_	Application Numb	ber 1	0/756,970							
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METHOD OF PAYMENT (check all that apply)  □ Check	Applicant claims small e		Art Unit	Jnit 3733								
Check  Credit Card  Money Order  None  Other (please identify):    Deposit Account Deposit Account Number: 12-2424	TOTAL AMOUNT OF PAYM		Attorney Docket	No. N	MSDI-223/PC444.06							
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Charge any additional fee(s) or underpayments of fee(s)  V Credit any overpayments  WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Application Type  Fee (\$) Fee	For the above-identific	ed deposit	account, the Director	r is here	eby authorized to:	(check a	all that apply)					
Charge any additional fee(s) or underpayments of fee(s)  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (3) Fe												
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Information and authorization on PTO-2038.   FEE CALCULATION	under 37 CFR 1.16 and 1.17											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES   SEARCH FEES   Small Entity   Fee (\$)	Information and authorization on PTO-2038.											
Filing Fee (s)	FEE CALCULATION											
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims Fee (\$) Fee Pald (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  - 20 or HP =					250		300					
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Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  - 20 or HP =   x   = 0.00   Fee (\$)   Fee Pald (\$)    HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)   Fee Pald (\$)    HP = highest number of independent claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 =   /50 =   (round up to a whole number) x   =    4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): Terminal Disclaimer Fee   130.00		5					Fee (\$)					
Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$) Fee Pald (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$) Fee Pald (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Pald (\$)  Cround up to a whole number)  Fee Shald (\$)  Other (e.g., late filing surcharge): Terminal Disclaimer Fee  130.00		cluding R	(eissues)									
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Registration No. (Attomey/Agent) 45,431 Telephone 317-636-4341 Signature Name (Print/Type) Brad A. Schepers Date August 9, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.